NOV 1 8 200CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Assistant Commissioner for Patents Washington, D.C. 20231		Application Number		09/2	72,069	3	F	
		Filing Date			March 18, 1999			
		First Nam	First Named Inventor			Glen		
		Group Art Unit 2			2672			
		Examiner I	Examiner Name C. Harrison					
		Attorney Do	ocket Number	0100.9900340				
Firm or Individual Name					-	DEIVE		
Address		-						
Address				T	echnolo	gy Center	26	
			State		ZIP			
City								
City Country								
			Fax					

Signature of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

Registered practitioner named in the application transmittal letter in an application without an

executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Assignee of record of the entire interest.

Attorney or Agent of record.

Timothy J. Bechen, Reg. No. 48,126

_forms are submitted.

Typed or Printed

Name

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.